



THE CITY OF GREENWOOD

520 MONUMENT STREET ♦ PO BOX 40 ♦ PHONE – (864) 942-8412 ♦ FAX – (864) 942-8470

<http://www.ci.greenwood.sc.us>

RENTAL HOUSING REGISTRATION FORM

FOR CITY OF GREENWOOD USE ONLY

Registration # _____ Entry Date _____ Initial _____

TO BE COMPLETED BY PROPERTY OWNER OR DESIGNATED PERSON, FIRM, OR CORPORATION

Property Owner Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email Address: _____

Rental Property Address _____

City _____ State _____ Zip Code _____

Designated Person, Firm or Corporation* _____

**Persons must list the name of the person, firm, or corporation located within a 75-mile radius of the City of Greenwood responsible for the care and maintenance of the property.*

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email Address: _____

Property Owner/Designated Person Signature
